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027765 7590 09/28/2006

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Stephanie Lal	(Depositor's name)
<i>Stephanie Lal</i>	(Signature)
11/02/2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/08,347	02/25/2004	Chang-Lien Wu	REAP0048USA	2346

TITLE OF INVENTION: METHOD AND APPARATUS FOR PROVIDING FAULT TOLERANCE TO MEMORY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MASKULINSKI, MICHAEL C	2110	714-008000

11/02/2006 TBESKANE 00200044 503165 19708347

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

FC:1581 1400.00 DA  
 FC:1584 1400.00 DA  
 Winston Hsu

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Realtek Semiconductor Corp.

2 Innovation Rd. II, Science Park, HsinChu, Taiwan, R.O.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

## 4a. The following fee(s) are submitted:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3105 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature *Winston Hsu*

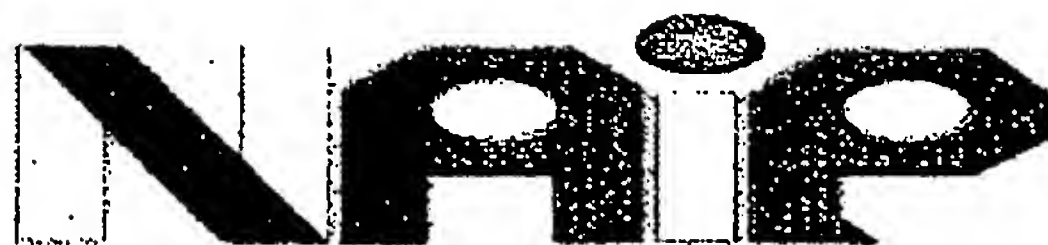
Date 11/02/2006

Typed or printed name Winston Hsu

Registration No. 41,526

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**FAX TO: Mail Stop Issue Fee**

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**FROM: Winston Hsu, PATENT AGENT, REG. NO.: 41,526**

**SERIAL NO.: 10/708,347**

**ATTORNEY DOCKET NO.: REAP0048USA**

**SUBJECT: ISSUE FEE PAYMENT**

**TOTAL PAGES: 2 PAGES (INCLUDING COVER PAGE)**

**Winston Hsu 11/02/2006**

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